

No. R. 1062

19 December 2012

PETROLEUM PRODUCTS ACT, 1977**AMENDMENT OF REGULATIONS REGARDING PETROLEUM PRODUCTS
WHOLESALE LICENCES**

The Minister of Energy has under section 12C, read with sections 2A, 2C, 2E and 2F of the Petroleum Products Act, 1977 (Act No. 120 of 1977), made the regulations in the Schedule.

SCHEDULE**Definition**

1. In these regulations "the Regulations" means the regulations published under Government Notice No. R. 287 of 27 March 2006.

Amendment of regulation 12 to the Regulations

2. Regulation 12 (5) of the Regulations is hereby amended by the substitution for paragraph (a) of the following paragraph:

“(a) remains the property of the Department of Energy”.

Substitution of Annexure A of the Regulations

3. Annexure A to this Schedule is hereby substituted for Annexure A to the Regulations.

Substitution of Annexure B to the Regulations

4. Annexure B to this Schedule is hereby substituted for Annexure B to the Regulations.

ANNEXURE A: FORMS



energy

Department:
Energy
REPUBLIC OF SOUTH AFRICA

DE 28

APPLICATION FOR WHOLESALE LICENCE

PETROLEUM PRODUCTS ACT 120 OF 1977 AS AMENDED - PETROLEUM PRODUCTS WHOLESALE LICENCE REGULATIONS 2006

INSTRUCTIONS

1. READ REGULATIONS BEFORE COMPLETING THIS APPLICATION FORM.
2. USE CAPITAL LETTERS AND WHERE APPLICABLE MARK WITH A ☒.
3. INDICATE IF APPLICATION IS FOR AN EXISTING OPERATION (CONVERSION LICENCE) OR A NEW OPERATION APPLICATION (NEW LICENCE)

☐ CONVERSION LICENCE☐ NEW LICENCE**OFFICIAL USE ONLY**

WHOLESALE LICENCE NUMBER

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SECTION 1: APPLICANT'S DETAILS

REGISTERED
NAME
IN FULL

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TRADE NAME
IN FULL

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POSTAL
ADDRESS OF
REGISTERED
OFFICE

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POSTAL CODE

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PHYSICAL
ADDRESS OF
REGISTERED
OFFICE

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POSTAL CODE

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BUSINESS
TEL NO.
(INCLUDE
CODE)

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FAX NO.
(BUSINESS)

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MOBILE
PHONE
NUMBER

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☐ EASTERN CAPE ☐ FREE STATE ☐ GAUTENG ☐ KWAZULU-NATAL

☐ LIMPOPO ☐ MPUMALANGA ☐ NORTHERN CAPE ☐ NORTH WEST

☐ WESTERN CAPE

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

DOCUMENTS TO BE ATTACHED WITH THE APPLICATION FOR A WHOLESALE LICENCE

1. A certified copy of the applicant's identity document, if the applicant is a natural person, and in the case of a non- South African citizen, permanent residence permit or employment permit and proof of residence in South Africa, or proof of domicile in South Africa, as the case may be.

OR

a certified copy of the business entity's registration documents, if the applicant is a corporate entity or a trust.

2. A declaration by the applicant stating that the applicant is in compliance with the Charter or a statement of its plans to meet the requirements of the Charter.

3. A declaration by the applicant, who qualifies in terms of Section 2D of the Act, that the applicant is in compliance with all national, provincial and local government legal requirements applicable for the operation of the activity concerned that are in force at the time the application is made.

4. A list of all storage and distribution facilities intended to be used, including shared storage and distribution facilities, with specific reference to-
 - a. the location;
 - b. the capacity;
 - c. the ownership, including the ownership of the land on which the storage facilities are situated, and, in the case of shared ownership, the basis of sharing; and
 - d. the names of other wholesalers sharing the same facilities.

The information required in terms of attachment number 5 must be provided in respect of the different prescribed petroleum products which are to be stored.

5. If necessary, the original or certified copy of a declaration by the applicant giving reasons why any attachment required is not provided.

DECLARATION

I (full names).....hereby declare
that all information provided herein is within my personal knowledge and that-

- a) I am duly authorised to make this declaration;
- b) I am the designated person responsible for this licence and any conditions attached thereto;
- c) I have read and understood the regulations related hereto, with specific reference to Regulation 25 regarding any false declaration; and
- d) all information provided herein is to the best of my knowledge true and correct.

Signed at.....(place) on this..... day of.....(month)

..... (year)

.....
Signature

I certify that the deponent-

- (a) has acknowledged that he/she knows and understands the contents of this application form and its annexures, that he/she has no objection to taking the prescribed oath and that he/she considers the oath binding on his/her conscience; and
- (b) has in the prescribed manner sworn that the contents of this application form and its annexures are true and signed same before me at
..... (place) on thisday of
.....(month).....(year).

COMMISSIONER OF OATHS

Name: _____

Address: _____

Capacity: _____

NOTE: If this application form is completed electronically it must be printed out, signed before a Commissioner of Oaths and submitted with the necessary supporting documents and submitted to the appropriate regional office using the relevant address, mentioned below.

<p><u>Gauteng</u> Private Bag X96 Pretoria 0001 (012) 406 8000</p> <p><u>Physical Address</u> Corner Paul Kruger & Visagie Visagie Street, 192 Pretoria 0001</p>	<p><u>Western Cape</u> Private Bag X9 Roggebaai 8012 (021) 418 3724</p> <p><u>Physical Address</u> 34 The Terraces Building Riebeeck & Bree Streets Cape Town 8001</p>	<p><u>Kwazulu- Natal</u> Private Bag X54307 Durban 4000 (031) 335 9647/ 9638</p> <p><u>Physical Address</u> Durban Bay House (3rd floor) Anton Lembede street, 333 Durban 4000</p>
<p><u>Eastern Cape</u> Private Bag X6013 Port Elizabeth 6000 (041) 396 3914</p> <p><u>Physical Address</u> 690 Crispin Hall Cnr Mount and Diaz Road Port Elizabeth 6000</p>	<p><u>Free State</u> Private Bag X3658 Welkom 9463 (057) 391 1300</p> <p><u>Physical Address</u> The Strip Building Stateway & Bok Street, 314 Welkom 9460</p>	<p><u>Mpumalanga</u> Private Bag X7297 Witbank 1035 (013) 653 0500</p> <p><u>Physical Address</u> Province Building Cnr Paul Kruger & Botha Avenue Witbank 1035</p>
<p><u>North West</u> Private Bag XA1 Klerksdorp 2570 (018) 464 2460</p> <p><u>Physical Address</u> Vaal University of Technology Building Cnr Voortrekker & Margareta Prinsloo street Klerksdorp 2570</p>	<p><u>Northern Cape</u> Private Bag X6093 Kimberley 8301 (053) 807 1710</p> <p><u>Physical Address</u> 65 Phakamile Mabija Street Perm Building Northern Cape Kimberley 8300</p>	<p><u>Limpopo</u> Private Bag X9712 Polokwane 0699 (015) 287 4720</p> <p><u>Physical Address</u> Broll Building Dorp Street 101 Polokwane 0699</p>



energy

Department:
Energy
REPUBLIC OF SOUTH AFRICA

DE 44

APPLICATION FOR TEMPORARY LICENCE

PETROLEUM PRODUCTS ACT 120 OF 1977 AS AMENDED - PETROLEUM PRODUCTS LICENCE REGULATIONS 2006

INSTRUCTIONS

1. READ REGULATIONS BEFORE COMPLETING THIS APPLICATION FORM.
2. USE CAPITAL LETTERS AND WHERE APPLICABLE MARK WITH A ☒.

PLEASE COMPLETE

RETAIL WHOLESALÉ /
MANUFACTURING LICENCE NUMBER

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SECTION 1: APPLICANTS DETAILS

FULL NAME OF TEMPORARY LICENCE APPLICANT IF NOT AN INDIVIDUAL (for example, company name or trust name etc.)

[illegible]

ENTER FULL NAME OF TEMPORARY LICENCE APPLICANT IF AN INDIVIDUAL

NOTE: In the event that a corporate entity or partnership, trust or body other than an individual makes the application, state here the personal particulars of the person authorised to make this application on behalf of such body.

TITLE

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FAMILY NAME

[illegible]

FIRST NAME

[illegible]

IDENTITY NO.

[illegible]

INDICATE REASONS WHY APPLICANT (ABOVE) IS THE APPROPRIATE PERSON TO BE ISSUED WITH A TEMPORARY LICENCE

[illegible]

DECLARATION

I (full names).....hereby declare
that all information provided herein is within my personal knowledge and that-

- a) I am duly authorised to make this declaration;
- b) I am the designated person responsible for this licence and any conditions attached thereto;
- c) I have read and understood the regulations related hereto, with specific reference to regulation 34 (retail licence), regulation 25 (wholesale licence) and regulation 27 (manufacturing licence) regarding any false declaration; and
- d) all information provided herein is to the best of my knowledge true and correct.

Signed at.....(place) on this..... day of.....(month)
.....(year)

.....
Signature

I certify that the deponent-

- (a) has acknowledged that he/she knows and understands the contents of this application form and its annexures, that he/she has no objection to taking the prescribed oath and that he/she considers the oath binding on his/her conscience; and
- (b) has in the prescribed manner sworn that the contents of this application form and its annexures are true and signed same before me at (place) on this day of(month).....(year).

COMMISSIONER OF OATHS

Name: _____

Address: _____

Capacity: _____

NOTE: If this application form is completed electronically it must be printed out, signed before a Commissioner of Oaths and submitted with the necessary supporting documents and submitted to the appropriate regional office using the relevant address, mentioned below.

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<p><u>Eastern Cape</u> Private Bag X6013 Port Elizabeth 6000 (041) 396 3914</p> <p><u>Physical Address</u> 690 Crispin Hall Cnr Mount and Diaz Road Port Elizabeth 6000</p>	<p><u>Free State</u> Private Bag X3658 Welkom 9463 (057) 391 1300</p> <p><u>Physical Address</u> The Strip Building Stateway & Bok Street, 314 Welkom 9460</p>	<p><u>Mpumalanga</u> Private Bag X7297 Witbank 1035 (013) 653 0500</p> <p><u>Physical Address</u> Province Building Cnr Paul Kruger & Botha Avenue Witbank 1035</p>
<p><u>North West</u> Private Bag XA1 Klerksdorp 2570 (018) 464 2460</p> <p><u>Physical Address</u> Vaal University of Technology Building Cnr Voortrekker & Margareta Prinsloo street Klerksdorp 2570</p>	<p><u>Northern Cape</u> Private Bag X6093 Kimberley 8301 (053) 807 1710</p> <p><u>Physical Address</u> 65 Phakamile Mabija Street Perm Building Northern Cape Kimberley 8300</p>	<p><u>Limpopo</u> Private Bag X9712 Polokwane 0699 (015) 287 4720</p> <p><u>Physical Address</u> Broll Building Dorp Street 101 Polokwane 0699</p>



energy

Department:
Energy
REPUBLIC OF SOUTH AFRICA

DE 25

WHOLESALE LICENCE ANNUAL INFORMATION (SUBMISSION FORM)

PETROLEUM PRODUCTS ACT 120 OF 1977 AS AMENDED - PETROLEUM PRODUCTS WHOLESALE REGULATIONS
2006

INSTRUCTIONS

1. READ THE REGULATIONS BEFORE COMPLETING THIS APPLICATION FORM.
2. USE CAPITAL LETTERS AND WHERE APPLICABLE MARK WITH AN ☒.

PLEASE COMPLETE

WHOLESALE LICENCE NUMBER

	/					/				
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SECTION 1: COMPLETE LICENSEE'S DETAILS

REGISTERED
NAME
IN FULL

[illegible]

TRADE NAME
IN FULL

[illegible]

ENTER DETAILS OF CONTACT MEMBER OF ENTITY

TITLE

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FAMILY NAME

[illegible]

FIRST NAME

[illegible]

IDENTITY NO.

[illegible]**SECTION 2: COMPLETE IF THERE IS A CHANGE IN LICENSEE'S PARTICULARS**TRADE NAME
IN FULL[illegible]

POSTAL
ADDRESS OF
REGISTERED
OFFICE

[illegible]

POSTAL CODE

BUSINESS
TEL NO.
(INCLUDE
CODE)

[illegible]

[illegible][illegible][illegible]

TITLE

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[illegible][illegible][illegible]

PETROL

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

PETROL

[illegible]ILLUMINATING
PARAFFIN[illegible][illegible]

AVIATION
GASOLINE

[illegible]LIQUIFIED
PETROLEUM
GAS[illegible]

JET FUEL

[illegible]

BIOFUELS

[illegible]

BLACK EMPLOYEES:

MALE

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FEMALE

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DISABLED

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COLOURED EMPLOYEES:

MALE

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FEMALE

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DISABLED

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INDIAN EMPLOYEES: MALE

FEMALE

DISABLED

WHITE EMPLOYEES: MALE

FEMALE

DISABLED

TOTAL NUMBER OF EMPLOYEES

INDICATE OWNERSHIP BY HISTORICALLY DISADVANTAGED SOUTH AFRICANS (HDSA's) IN PERCENTAGE

%

DOCUMENTS TO BE ATTACHED WITH THE SUBMISSION OF THE WHOLESALE ANNUAL INFORMATION FORM

1. A declaration by the licensee that the ownership of the licensed activity has not changed.
2. The volumes of each prescribed petroleum products purchased and sold outside of the Republic of South Africa.
3. A declaration by the applicant stating that the applicant is in compliance with all national provincial and local government legal requirements.
4. The volumes of each prescribed petroleum products purchased and sold outside of the Republic of South Africa.
5. A progress and an updated plan in the respect of complying with the objectives of the Charter.
6. A report on the training and the number and title of the qualifications obtained by learners employed by the licensed wholesaler.

DECLARATION

I (full names).....hereby declare
that all information provided herein is within my personal knowledge and that-

- a) I am duly authorised to make this declaration;
- b) I am the designated person responsible for this licence and any conditions attached thereto;
- c) I have read and understood the regulations related hereto, with specific reference to Regulation 25 regarding any false declaration; and
- d) all information provided herein is to the best of my knowledge true and correct.

Signed at.....(place) on this..... day of.....(month)

..... (year)

.....
Signature

I certify that the deponent-

- (a) has acknowledged that he/she knows and understands the contents of this application form and its annexures, that he/she has no objection to taking the prescribed oath and that he/she considers the oath binding on his/her conscience; and
- (b) has in the prescribed manner sworn that the contents of this application form and its annexures are true and signed same before me at (place) on thisday of(month).....(year).

COMMISSIONER OF OATHS

Name: _____

Address: _____

Capacity: _____

NOTE: If this application form is completed electronically it must be printed out, signed before a Commissioner of Oaths and submitted with the necessary supporting documents and submitted to the appropriate regional office using the relevant address, mentioned below.

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<p><u>Eastern Cape</u> Private Bag X6013 Port Elizabeth 6000 (041) 396 3914</p> <p><u>Physical Address</u> 690 Crispin Hall Cnr Mount and Diaz Road Port Elizabeth 6000</p>	<p><u>Free State</u> Private Bag X3658 Welkom 9463 (057) 391 1300</p> <p><u>Physical Address</u> The Strip Building Stateway & Bok Street, 314 Welkom 9460</p>	<p><u>Mpumalanga</u> Private Bag X7297 Witbank 1035 (013) 653 0500</p> <p><u>Physical Address</u> Province Building Cnr Paul Kruger & Botha Avenue Witbank 1035</p>
<p><u>North West</u> Private Bag XA1 Klerksdorp 2570 (018) 464 2460</p> <p><u>Physical Address</u> Vaal University of Technology Building Cnr Voortrekker & Margareta Prinsloo street Klerksdorp 2570</p>	<p><u>Northern Cape</u> Private Bag X6093 Kimberley 8301 (053) 807 1752</p> <p><u>Physical Address</u> 65 Phakamile Mabija Street Perm Building Northern Cape Kimberley 8300</p>	<p><u>Limpopo</u> Private Bag X9712 Polokwane 0699 (015) 287 4720</p> <p><u>Physical Address</u> Broll Building Dorp Street 101 Polokwane 0699</p>

ANNEXURE B: LICENCE FEES

Wholesale licence fee	R 1000
Annual wholesale licence fee	R 500
Duplicate licence fee	R 500
Temporary licence fee	R 500
Licence amendment fee	R 500

Payment must be deposited into the following relevant regional account closest to the region where the application is lodged –

Bank: Nedbank

Account holder: Department of Energy

Include your reference number, which will be provided by the Controller, on the deposit slip.

Account Holder Name	Account Number	Branch code	Branch Name
Department of Energy - GP	1454 117 761	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - KZN	1454 117 788	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - NW	1454 117 796	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - WC	1454 117 818	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - MP	1454 117 826	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - FS	1454 117 834	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - EC	1454 117 842	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - LP	1454 117 850	14 54 05	Corporate Client Services, Johannesburg
Department of Energy - NC	1454 117 869	14 54 05	Corporate Client Services, Johannesburg